

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A 1**
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report:
300/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)

C00000000

4 Date

04/07/2003

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Walter Pye**6** Contributor address; City; State; Zip Code
[REDACTED]**7** Amount of contribution (\$)

300.00

8 In-kind contribution description (if applicable)**9** Principal occupation (Optional)**10** Employer (Optional)

Date

04/25/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Regina RomanoContributor address; City; State; Zip Code
[REDACTED]

Amount of contribution (\$)

70.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

05/23/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Karen SpitzContributor address; City; State; Zip Code
[REDACTED]

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

05/15/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Samuel K. EatonContributor address; City; State; Zip Code
[REDACTED]

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

06/27/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Caroline BlitzerContributor address; City; State; Zip Code
[REDACTED]

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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3 ACCOUNT # (Ethics Commission filers)

C00000000

4 Date

06/20/2003

5 Full name of contributor ☐ out-of-state PAC(ID# _____)

Richard W. Wortham III

6 Contributor address; City; State; Zip Code**7 Amount of contribution (\$)**

1000.00

8 In-kind contribution description (if applicable)**9 Principal occupation (Optional)****10 Employer (Optional)****Date**

03/17/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)

James Woods

Contributor address; City; State; Zip Code**Amount of contribution (\$)**

5000.00

In-kind contribution description (if applicable)**Principal occupation (Optional)****Employer (Optional)****Date**

06/30/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)

J. Todd Partridge

Contributor address; City; State; Zip Code**Amount of contribution (\$)**

200.00

In-kind contribution description (if applicable)**Principal occupation (Optional)****Employer (Optional)****Date**

04/29/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)

Stuart Manyard Smith

Contributor address; City; State; Zip Code**Amount of contribution (\$)**

5000.00

In-kind contribution description (if applicable)**Principal occupation (Optional)****Employer (Optional)****Date**

05/30/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)

Andrew Pickens

Contributor address; City; State; Zip Code**Amount of contribution (\$)**

1000.00

In-kind contribution description (if applicable)**Principal occupation (Optional)****Employer (Optional)**

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A 1**
(FOR FORMS C/OH & SPAC)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this report:
302/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT #

(Ethics Commission filers)

C00000000

4 Date

04/23/2003

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Karen Loper**6 Contributor address; City; State; Zip Code**
[REDACTED]**7 Amount of contribution (\$)**

10.00

8 In-kind contribution description (if applicable)**9 Principal occupation (Optional)****10 Employer (Optional)**

Date

06/30/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Don J. Wang**Contributor address; City; State; Zip Code**
[REDACTED]**Amount of contribution (\$)**

5000.00

In-kind contribution description (if applicable)**Principal occupation (Optional)****Employer (Optional)**

Date

04/25/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Lewis Frapart**Contributor address; City; State; Zip Code**
[REDACTED]**Amount of contribution (\$)**

100.00

In-kind contribution description (if applicable)**Principal occupation (Optional)****Employer (Optional)**

Date

06/05/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Jimmy Dunne**Contributor address; City; State; Zip Code**
[REDACTED]**Amount of contribution (\$)**

20.00

In-kind contribution description (if applicable)**Principal occupation (Optional)****Employer (Optional)**

Date

06/05/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Barbara E. Goins**Contributor address; City; State; Zip Code**
[REDACTED]**Amount of contribution (\$)**

50.00

In-kind contribution description (if applicable)**Principal occupation (Optional)****Employer (Optional)**

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A 1
(FOR FORMS C/OH & SPAC)

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1 Total pages this report:
303/430

2 FILER NAME

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)

C00000000

4 Date

05/13/2003

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Priscilla K. Pilon

6 Contributor address; City; State; Zip Code
[REDACTED]

7 Amount of contribution (\$)

1000.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

06/30/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Joseph Cialone

Contributor address; City; State; Zip Code
[REDACTED]

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

04/29/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Dunia C Haddad

Contributor address; City; State; Zip Code
[REDACTED]

Amount of contribution (\$)

800.00

In-kind contribution description (if applicable)

Food and beverages

Principal occupation (Optional)

Employer (Optional)

Date

03/21/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
Gretchen L. Walter

Contributor address; City; State; Zip Code
[REDACTED]

Amount of contribution (\$)

5000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

06/07/2003

Full name of contributor ☐ out-of-state PAC(ID# _____)
David Brown

Contributor address; City; State; Zip Code
[REDACTED]

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Print mailer, stamps, food - ice

Principal occupation (Optional)

Employer (Optional)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A 1**
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1 Total pages this report:
304/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)

C00000000

4 Date

05/15/2003

5 Full name of contributor ☐ out-of-state PAC(ID# _____)

Tom Ross

6 Contributor address; City; State; Zip Code**7** Amount of
contribution (\$)

35.00

8 In-kind contribution
description (if applicable)**9** Principal occupation (Optional)**10** Employer (Optional)

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
305/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

06/10/2003

5 Payee name

Asian Chamber of Commerce

7 Amount

(\$)

60.00

6 Payee address; City; State; Zip Code7457 Harwin Plaza II
Suite 133
Houston TX 77036**8 Purpose of expenditure** (See instructions regarding type of information required.)

2 Luncheon Tickets

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/22/2003

Payee name

Michael Moore

Amount

(\$)

100.00

Payee address; City; State; Zip Code2110 Baldwin
Houston TX 77033**Purpose of expenditure** (See instructions regarding type of information required.)

Signs--reimb

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

01/28/2003

Payee name

SBC

Amount

(\$)

624.32

Payee address; City; State; Zip CodeP.O. Box 3025
Houston TX 77097-0043**Purpose of expenditure** (See instructions regarding type of information required.)

Phones

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/15/2003

Payee name

Sharon Haley

Amount

(\$)

1720.00

Payee address; City; State; Zip Code3011 A. Peach Hollow
Pearland TX 77584**Purpose of expenditure** (See instructions regarding type of information required.)

Net Payroll

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
306/430**2** FILER NAME

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

05/09/2003

5 Payee name

Fiesta Loma Linda

7 Amount

(\$)

383.73

6 Payee address; City; State; Zip Code

2111 Telephone Road

Houston TX 77023

8 Purpose of expenditure (See instructions regarding type of information required.)
Meals for Guests**9** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

03/18/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

1671.00

Payee address; City; State; Zip Code

2800 Post Oak Blvd.

Suite 2400

Houston TX 77056

Purpose of expenditure (See instructions regarding type of information required.)
Stickers

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/14/2003

Payee name

Hotshot

Amount

(\$)

28.90

Payee address; City; State; Zip Code

P.O. Box 701189

Houston TX 77270-1189

Purpose of expenditure (See instructions regarding type of information required.)
Delivery Services

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

02/27/2003

Payee name

Andrea Young

Amount

(\$)

1227.23

Payee address; City; State; Zip Code

5500 Sampson St #2309

Houston TX 77004

Purpose of expenditure (See instructions regarding type of information required.)
Net Payroll

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 307/430
2 FILER NAME Mr. William H. White		3 ACCOUNT # (Ethics Commission filers) C00000000
4 Date 05/01/2003	5 Payee name Network Interstate 6 Payee address; City; State; Zip Code 230 T.C. Jester Blvd. Houston TX 77007	7 Amount (\$) 165.03
8 Purpose of expenditure (See instructions regarding type of information required.) T-Shirts		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/24/2003	Payee name U. S. Postmaster Payee address; City; State; Zip Code Barbara Jordan Main Post Office Houston TX 77201-9998	Amount (\$) 500.00
Purpose of expenditure (See instructions regarding type of information required.) Postage		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 04/30/2003	Payee name Susybelle Zook Payee address; City; State; Zip Code 1702 Morse Street Houston TX 77019	Amount (\$) 1438.00
Purpose of expenditure (See instructions regarding type of information required.) Net Payroll		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held
Date 05/30/2003	Payee name Butrum & Associates Payee address; City; State; Zip Code 952 Echo Lane Suite 350 Houston TX 77024	Amount (\$) 96.45
Purpose of expenditure (See instructions regarding type of information required.) Copies		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
308/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

06/30/2003

5 Payee name

Amy's Cafe

7 Amount

(\$)

91.36

6 Payee address; City; State; Zip Code720 N. Post Oak Road
Suite 124
Houston TX 77024**8 Purpose of expenditure** (See instructions regarding type of information required.)
Food for volunteers**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

06/13/2003

Payee name

Pam Rosenauer

Amount

(\$)

1627.28

Payee address; City; State; Zip Code5711 Sugar Hill #68
Houston TX 77057**Purpose of expenditure** (See instructions regarding type of information required.)
Net payroll**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

03/31/2003

Payee name

Alliance Payroll Service

Amount

(\$)

39.24

Payee address; City; State; Zip Code12707 North Freeway
Suite 320
Houston TX 77060**Purpose of expenditure** (See instructions regarding type of information required.)
Payroll services**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

03/31/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

353.73

Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**Purpose of expenditure** (See instructions regarding type of information required.)
Stickers**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 309/430	
2 FILER NAME Mr. William H. White		3 ACCOUNT # (Ethics Commission filers) C00000000	
4 Date 06/02/2003	5 Payee name Triet Nguyen 6 Payee address; City; State; Zip Code 1415 Louisiana Suite 3000 Houston TX 77002	7 Amount (\$) 232.72	
8 Purpose of expenditure (See instructions regarding type of information required.) Reimb for computer eq		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 01/29/2003	Payee name Aramark Premium Services at Minute Maid Park Payee address; City; State; Zip Code P.O. Box 288 Houston TX 77002	Amount (\$) 627.86	
Purpose of expenditure (See instructions regarding type of information required.) Food for announcement		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 04/18/2003	Payee name ttweak Payee address; City; State; Zip Code 4910 Main Street Houston TX 77002	Amount (\$) 11100.00	
Purpose of expenditure (See instructions regarding type of information required.) Media		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 03/31/2003	Payee name Sharon Haley Payee address; City; State; Zip Code 3011 A. Peach Hollow Pearland TX 77584	Amount (\$) 1820.00	
Purpose of expenditure (See instructions regarding type of information required.) Net Payroll		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
310/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

06/21/2003

5 Payee name

Triet Nguyen

7 Amount

(\$)

102.83

6 Payee address; City; State; Zip Code1415 Louisiana
Suite 3000
Houston TX 77002**8 Purpose of expenditure (See instructions regarding type of information required.)**

Reimb for software

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

04/15/2003

Payee name

Susybelle Zook

Amount

(\$)

1562.94

Payee address; City; State; Zip Code1702 Morse Street
Houston TX 77019**Purpose of expenditure (See instructions regarding type of information required.)**

Net Payroll

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

05/20/2003

Payee name

Scalable Software

Amount

(\$)

4000.00

Payee address; City; State; Zip Code720 N. Post Oak Road Suite 500
Houston TX 77024**Purpose of expenditure (See instructions regarding type of information required.)**

Furniture rental fee

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

05/30/2003

Payee name

Butrum & Associates

Amount

(\$)

24.00

Payee address; City; State; Zip Code952 Echo Lane
Suite 350
Houston TX 77024**Purpose of expenditure (See instructions regarding type of information required.)**

Reimb Long Distance

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
311/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

02/06/2003

5 Payee name

Darcy Mackey

7 Amount

(\$)

2000.00

6 Payee address; City; State; Zip Code3303 S. Rice
Suite 210-B
Houston TX 77056**8 Purpose of expenditure** (See instructions regarding type of information required.)
Contract Labor**9 Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

05/05/2003

Payee name

Sprint Digital Print

Amount

(\$)

5615.47

Payee address; City; State; Zip Code10100 Clay Road
Suite C
Houston TX 77080**Purpose of expenditure** (See instructions regarding type of information required.)
Signs**Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

03/28/2003

Payee name

Lanier

Amount

(\$)

620.27

Payee address; City; State; Zip Code13135 Dairy Ashford
Suite 300
Sugar Land TX 77478**Purpose of expenditure** (See instructions regarding type of information required.)
Copy Machine**Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

03/31/2003

Payee name

Andrea Young

Amount

(\$)

1277.23

Payee address; City; State; Zip Code5500 Sampson St #2309
Houston TX 77004**Purpose of expenditure** (See instructions regarding type of information required.)
Net Payroll**Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
312/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

06/30/2003

5 Payee name

Myra Jolivet

7 Amount

(\$)

2750.00

6 Payee address; City; State; Zip Code1200 Smith
16th Floor
Houston TX 77002**8 Purpose of expenditure** (See instructions regarding type of information required.)
Consulting**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

03/05/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

837.78

Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**Purpose of expenditure** (See instructions regarding type of information required.)
Banner**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/06/2003

Payee name

Glenn W. Grantom

Amount

(\$)

1960.81

Payee address; City; State; Zip Code1301 Mistletoe Lane

Kingwood TX 77339**Purpose of expenditure** (See instructions regarding type of information required.)
Net payroll**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/05/2003

Payee name

Lulac District VIII

Amount

(\$)

100.00

Payee address; City; State; Zip CodePO Box 15100

Houston TX 77220-5100**Purpose of expenditure** (See instructions regarding type of information required.)
Entry Fee for Cinco parade**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

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1 Total pages report:
313/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

06/30/2003

5 Payee name

Rives Carlberg L.P.

7 Amount

(\$)

1455.96

6 Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**8** Purpose of expenditure (See instructions regarding type of information required.)
Lapel Pins**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

03/31/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

165.38

Payee address; City; State; Zip Code

2800 Post Oak Blvd.
Suite 2400
Houston TX 77056Purpose of expenditure (See instructions regarding type of information required.)
StickersComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

03/19/2003

Payee name

U. S. Postmaster

Amount

(\$)

740.00

Payee address; City; State; Zip Code

Barbara Jordan Main Post Office

Houston TX 77201-9998Purpose of expenditure (See instructions regarding type of information required.)
PostageComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

03/17/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

2416.48

Payee address; City; State; Zip Code

2800 Post Oak Blvd.
Suite 2400
Houston TX 77056Purpose of expenditure (See instructions regarding type of information required.)
MediaComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

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1 Total pages report:
314/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

04/04/2003

5 Payee name

Rives Carlberg L.P.

7 Amount
(\$)

1758.25

6 Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**8 Purpose of expenditure** (See instructions regarding type of information required.)
Media**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

02/27/2003

Payee name

Rives Carlberg L.P.

Amount(\$)
2351.00**Payee address;** City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**Purpose of expenditure** (See instructions regarding type of information required.)
Invitations**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/30/2003

Payee name

Rives Carlberg L.P.

Amount(\$)
275.61**Payee address;** City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**Purpose of expenditure** (See instructions regarding type of information required.)
Stickers**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

02/13/2003

Payee name

Alliance Payroll Service

Amount(\$)
39.24**Payee address;** City; State; Zip Code12707 North Freeway
Suite 320
Houston TX 77060**Purpose of expenditure** (See instructions regarding type of information required.)
Payroll services**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
315/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

05/20/2003

5 Payee name

NGP Software, Inc.

7 Amount

(\$)

600.00

6 Payee address; City; State; Zip Code

5505 Connecticut Avenue NW PMB 277

Washington DC 20015

8 Purpose of expenditure (See instructions regarding type of information required.)
Software**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

03/27/2003

Payee name

Fairbank, Maslin, Maullin & Associates

Amount

(\$)

19000.00

Payee address; City; State; Zip Code

2425 Colorado Avenue Suite 180

Santa Monica CA 90404

Purpose of expenditure (See instructions regarding type of information required.)
Polling**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/05/2003

Payee name

Amy's Cafe

Amount

(\$)

51.21

Payee address; City; State; Zip Code

720 N. Post Oak Road

Suite 124

Houston TX 77024

Purpose of expenditure (See instructions regarding type of information required.)
Volunteer Meals**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

04/14/2003

Payee name

Susybelle Zook

Amount

(\$)

23.43

Payee address; City; State; Zip Code

1702 Morse Street

Houston TX 77019

Purpose of expenditure (See instructions regarding type of information required.)
Reimb for office expenses**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
316/430**2** FILER NAME

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

03/14/2003

5 Payee name

Andrea Young

7 Amount

(\$)

1277.23

6 Payee address; City; State; Zip Code

5500 Sampson St #2309

Houston TX 77004

8 Purpose of expenditure (See instructions regarding type of information required.)

Net Payroll

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

01/15/2003

Payee name

Sharon Haley

Amount

(\$)

570.00

Payee address; City; State; Zip Code

3011 A. Peach Hollow

Pearland TX 77584

Purpose of expenditure (See instructions regarding type of information required.)

Net Payroll

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/05/2003

Payee name

Butrum & Associates

Amount

(\$)

21.80

Payee address; City; State; Zip Code

952 Echo Lane

Suite 350

Houston TX 77024

Purpose of expenditure (See instructions regarding type of information required.)

Delivery Services

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/01/2003

Payee name

One Source Communications, Inc.

Amount

(\$)

405.94

Payee address; City; State; Zip Code

5904 Jessamine Suite A-16

Houston TX 77081

Purpose of expenditure (See instructions regarding type of information required.)

Stationery

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
317/430**2** FILER NAME
Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date
01/31/2003**5** Payee name
Sharon Haley**7** Amount
(\$)
1340.00**6** Payee address; City; State; Zip Code
3011 A. Peach Hollow
Pearland TX 77584**8** Purpose of expenditure (See instructions regarding type of information required.)
Net Payroll**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
06/30/2003Payee name
Alliance Payroll ServiceAmount
(\$)
5752.94Payee address; City; State; Zip Code
12707 North Freeway
Suite 320
Houston TX 77060Purpose of expenditure (See instructions regarding type of information required.)
FICA/Payroll TaxesComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
03/11/2003Payee name
HotshotAmount
(\$)
96.25Payee address; City; State; Zip Code
P.O. Box 701189
Houston TX 77270-1189Purpose of expenditure (See instructions regarding type of information required.)
Delivery ServicesComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
05/30/2003Payee name
Rives Carlberg L.P.Amount
(\$)
308.73Payee address; City; State; Zip Code
2800 Post Oak Blvd.
Suite 2400
Houston TX 77056Purpose of expenditure (See instructions regarding type of information required.)
PhotographyComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
318/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

06/13/2003

5 Payee name

Glenn W. Grantom

7 Amount
(\$)

1046.66

6 Payee address; City; State; Zip Code

1301 Mistletoe Lane

Kingwood TX 77339

8 Purpose of expenditure (See instructions regarding type of information required.)

Net payroll

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/14/2003

Payee name

Hill Research Consultants

Amount

(\$)

7200.00

Payee address; City; State; Zip Code

2202 Timberloch Place Suite 100

The Woodlands TX 77380

Purpose of expenditure (See instructions regarding type of information required.)

Consulting

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

06/06/2003

Payee name

Datavox

Amount

(\$)

243.57

Payee address; City; State; Zip Code

PO Box 297468

Houston TX 77297-7468

Purpose of expenditure (See instructions regarding type of information required.)

Phones

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

06/12/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

2843.22

Payee address; City; State; Zip Code

2800 Post Oak Blvd.

Suite 2400

Houston TX 77056

Purpose of expenditure (See instructions regarding type of information required.)

Media

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
319/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

06/13/2003

5 Payee name

Alliance Payroll Service

7 Amount
(\$)

4072.32

6 Payee address; City; State; Zip Code12707 North Freeway
Suite 320
Houston TX 77060**8 Purpose of expenditure** (See instructions regarding type of information required.)
FICA/Payroll Taxes**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

04/03/2003

Payee name

Jolivet/Fernandez

Amount

(\$)

3156.25

Payee address; City; State; Zip Code1200 Smith Street
16th Floor
Houston TX 77002**Purpose of expenditure** (See instructions regarding type of information required.)
Consulting**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/02/2003

Payee name

Susybelle Zook

Amount

(\$)

200.00

Payee address; City; State; Zip Code1702 Morse Street
Houston TX 77019**Purpose of expenditure** (See instructions regarding type of information required.)
Reimb Health Insurance**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/30/2003

Payee name

Michael Moore

Amount

(\$)

2999.76

Payee address; City; State; Zip Code2110 Baldwin
Houston TX 77033**Purpose of expenditure** (See instructions regarding type of information required.)
Net payroll**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
320/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

02/19/2003

5 Payee name

Rives Carlberg L.P.

7 Amount
(\$)

50000.00

6 Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**8 Purpose of expenditure** (See instructions regarding type of information required.)
Media**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/15/2003

Payee name

Michael Moore

Amount
(\$)

4.32

Payee address; City; State; Zip Code2110 Baldwin
Houston TX 77033**Purpose of expenditure** (See instructions regarding type of information required.)
Reimb for microphone**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

06/16/2003

Payee name

Hazel Mitchell

Amount
(\$)

16.11

Payee address; City; State; Zip Code15001 Crosswinds Drive
Apt. 601
Houston TX 77032**Purpose of expenditure** (See instructions regarding type of information required.)
Reimbursement for Kitchen supplies**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

01/20/2003

Payee name

Info Vine, Inc.

Amount
(\$)

596.00

Payee address; City; State; Zip CodeP.O. Box 2706
Houston TX 77252-2706**Purpose of expenditure** (See instructions regarding type of information required.)
Mailing**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
321/430**2** FILER NAME
Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date
05/14/2003**5** Payee name
Harris County Council of Organizations**7** Amount
(\$)
500.00**6** Payee address; City; State; Zip Code
4610 Delano
Houston TX 77004**8** Purpose of expenditure (See instructions regarding type of information required.)
Founder's event sponsorship**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held**Date**
03/05/2003**Payee name**
Butrum & Associates**Amount**
(\$)
1042.50**Payee address; City; State; Zip Code**
952 Echo Lane
Suite 350
Houston TX 77024**Purpose of expenditure (See instructions regarding type of information required.)**
Event costs--reimbursement**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**
05/05/2003**Payee name**
Hotshot**Amount**
(\$)
88.15**Payee address; City; State; Zip Code**
P.O. Box 701189
Houston TX 77270-1189**Purpose of expenditure (See instructions regarding type of information required.)**
Delivery Services**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**
06/09/2003**Payee name**
Four Seasons Hotel**Amount**
(\$)
4500.00**Payee address; City; State; Zip Code**
1300 Lamar Street
Houston TX 77010-3098**Purpose of expenditure (See instructions regarding type of information required.)**
June 11th Event--food**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
322/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

05/09/2003

5 Payee name

Northern Trust Bank

7 Amount

(\$)

10.00

6 Payee address; City; State; Zip Code

2701 Kirby Drive

Houston TX 77098

8 Purpose of expenditure (See instructions regarding type of information required.)
wire transfer charge**9** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

06/13/2003

Payee name

Alliance Payroll Service

Amount

(\$)

48.98

Payee address; City; State; Zip Code

12707 North Freeway

Suite 320

Houston TX 77060

Purpose of expenditure (See instructions regarding type of information required.)
Payroll Expenses

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

02/06/2003

Payee name

Thomas Hauser

Amount

(\$)

350.00

Payee address; City; State; Zip Code

412 W. Clay

Houston TX 77019

Purpose of expenditure (See instructions regarding type of information required.)
Contract Labor

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/23/2003

Payee name

Myra Jolivet

Amount

(\$)

100.24

Payee address; City; State; Zip Code

1200 Smith

16th Floor

Houston TX 77002

Purpose of expenditure (See instructions regarding type of information required.)
Reimb for event food

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 323/430	
2 FILER NAME Mr. William H. White		3 ACCOUNT # (Ethics Commission filers) C00000000	
4 Date 02/27/2003	5 Payee name Sharon Haley 6 Payee address; City; State; Zip Code 3011 A. Peach Hollow Pearland TX 77584	7 Amount (\$) 1505.00	
8 Purpose of expenditure (See instructions regarding type of information required.) Net Payroll		9 Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 05/14/2003	Payee name Hotshot Payee address; City; State; Zip Code P.O. Box 701189 Houston TX 77270-1189	Amount (\$) 182.35	
Purpose of expenditure (See instructions regarding type of information required.) Delivery Services		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 05/05/2003	Payee name One Source Communications, Inc. Payee address; City; State; Zip Code 5904 Jessamine Suite A-16 Houston TX 77081	Amount (\$) 373.46	
Purpose of expenditure (See instructions regarding type of information required.) Stationery		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 06/06/2003	Payee name Richard Lapin Payee address; City; State; Zip Code 2000 Bagby #5401 Houston TX 77002	Amount (\$) 20.00	
Purpose of expenditure (See instructions regarding type of information required.) Reimb parking		Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
324/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

06/06/2003

5 Payee name

Richard Lapin

7 Amount (\$)

9.94

6 Payee address; City; State; Zip Code

2000 Bagby #5401

Houston TX 77002

8 Purpose of expenditure (See instructions regarding type of information required.)
Supplies--reimb**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

06/21/2003

Payee name

Hotshot

Amount (\$)

23.95

Payee address; City; State; Zip Code

P.O. Box 701189

Houston TX 77270-1189

Purpose of expenditure (See instructions regarding type of information required.)
Delivery Services**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

02/27/2003

Payee name

Hallmark Office Products

Amount (\$)

138.76

Payee address; City; State; Zip Code

5650 Guhn Road #124

Houston TX 77040

Purpose of expenditure (See instructions regarding type of information required.)
Office Supplies**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

02/27/2003

Payee name

Alliance Payroll Service

Amount (\$)

1669.02

Payee address; City; State; Zip Code12707 North Freeway
Suite 320

Houston TX 77060

Purpose of expenditure (See instructions regarding type of information required.)
FICA/Payroll Taxes**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
325/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

02/12/2003

5 Payee name

Northern Trust Bank

7 Amount

(\$)

20.00

6 Payee address; City; State; Zip Code

2701 Kirby Drive

Houston TX 77098

8 Purpose of expenditure (See instructions regarding type of information required.)
wire transfer charge**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

06/06/2003

Payee name

Houston West Chamber of Commerce

Amount

(\$)

70.00

Payee address; City; State; Zip Code

10777 Westheimer

Suite 916

Houston TX 77042

Purpose of expenditure (See instructions regarding type of information required.)
June 19th Luncheon**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/15/2003

Payee name

Triet Nguyen

Amount

(\$)

547.00

Payee address; City; State; Zip Code

1415 Louisiana

Suite 3000

Houston TX 77002

Purpose of expenditure (See instructions regarding type of information required.)
Reimb for Software**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

06/14/2003

Payee name

SBC

Amount

(\$)

22.07

Payee address; City; State; Zip Code

P.O. Box 3025

Houston TX 77097-0043

Purpose of expenditure (See instructions regarding type of information required.)
Phones**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
326/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

06/13/2003

5 Payee name

Myra Jolivet

7 Amount

(\$)

2750.00

6 Payee address; City; State; Zip Code1200 Smith
16th Floor
Houston TX 77002**8 Purpose of expenditure** (See instructions regarding type of information required.)
Consulting**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

02/12/2003

Payee name

Kim Coffman & Associates

Amount

(\$)

188.90

Payee address; City; State; Zip Code2822 Briarhurst #37
Houston TX 77057**Purpose of expenditure** (See instructions regarding type of information required.)
photos**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

02/11/2003

Payee name

Deluxe Checks

Amount

(\$)

28.25

Payee address; City; State; Zip CodeP.O. Box 1186
Lancaster CA 93534-1186**Purpose of expenditure** (See instructions regarding type of information required.)
Supplies**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

06/18/2003

Payee name

U. S. Postmaster

Amount

(\$)

500.00

Payee address; City; State; Zip CodeBarbara Jordan Main Post Office
Houston TX 77201-9998**Purpose of expenditure** (See instructions regarding type of information required.)
Postage**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
327/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

04/25/2003

5 Payee name

Pam Rosenauer

7 Amount

(\$)

24.00

6 Payee address; City; State; Zip Code

5711 Sugar Hill #68

Houston TX 77057

8 Purpose of expenditure (See instructions regarding type of information required.)

Reimbursement for office supplies

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/18/2003

Payee name

Triet Nguyen

Amount

(\$)

31.07

Payee address; City; State; Zip Code

1415 Louisiana

Suite 3000

Houston TX 77002

Purpose of expenditure (See instructions regarding type of information required.)

Reimb. For computer supplies

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/30/2003

Payee name

Alliance Payroll Service

Amount

(\$)

3204.69

Payee address; City; State; Zip Code

12707 North Freeway

Suite 320

Houston TX 77060

Purpose of expenditure (See instructions regarding type of information required.)

FICA/Payroll Taxes

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

06/13/2003

Payee name

Sharon Haley

Amount

(\$)

1750.00

Payee address; City; State; Zip Code

3011 A. Peach Hollow

Pearland TX 77584

Purpose of expenditure (See instructions regarding type of information required.)

Net payroll

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
328/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

06/30/2003

5 Payee name

Rives Carlberg L.P.

7 Amount
(\$)

35.69

6 Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**8 Purpose of expenditure** (See instructions regarding type of information required.)
Photos**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

06/21/2003

Payee name

Pam Rosenauer

Amount
(\$)

26.79

Payee address; City; State; Zip Code5711 Sugar Hill #68
Houston TX 77057**Purpose of expenditure** (See instructions regarding type of information required.)
Reimb for food for office**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/15/2003

Payee name

Michael Moore

Amount
(\$)

2999.75

Payee address; City; State; Zip Code2110 Baldwin
Houston TX 77033**Purpose of expenditure** (See instructions regarding type of information required.)
Net payroll**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/15/2003

Payee name

Andrea Young

Amount
(\$)

1227.23

Payee address; City; State; Zip Code5500 Sampson St #2309
Houston TX 77004**Purpose of expenditure** (See instructions regarding type of information required.)
Net Payroll**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
329/430**2** FILER NAME
Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date
04/30/2003**5** Payee name

Andrea Young

7 Amount
(\$)
1277.23**6** Payee address; City; State; Zip Code

5500 Sampson St #2309

Houston TX 77004

8 Purpose of expenditure (See instructions regarding type of information required.)
Net Payroll**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

06/26/2003

Payee name

U. S. Postmaster

Amount
(\$)
500.00

Payee address; City; State; Zip Code

Barbara Jordan Main Post Office

Houston TX 77201-9998

Purpose of expenditure (See instructions regarding type of information required.)
PostageComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

03/25/2003

Payee name

U. S. Postmaster

Amount
(\$)
414.00

Payee address; City; State; Zip Code

Barbara Jordan Main Post Office

Houston TX 77201-9998

Purpose of expenditure (See instructions regarding type of information required.)
PostageComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

06/30/2003

Payee name

Baseline Apex Imaging,L.L.C.

Amount
(\$)
56.85

Payee address; City; State; Zip Code

5615 Richmond Avenue
Suite 165
Houston TX 77057Purpose of expenditure (See instructions regarding type of information required.)
Office SuppliesComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
330/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)

C00000000

4 Date

03/11/2003

5 Payee name

Rives Carlberg L.P.

7 Amount

(\$)

6125.00

6 Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**8** Purpose of expenditure (See instructions regarding type of information required.)

Focus group

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

03/31/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

319.52

Payee address; City; State; Zip Code

2800 Post Oak Blvd.
Suite 2400
Houston TX 77056

Purpose of expenditure (See instructions regarding type of information required.)

Focus groups

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

06/21/2003

Payee name

Hotshot

Amount

(\$)

126.40

Payee address; City; State; Zip Code

P.O. Box 701189

Houston TX 77270-1189

Purpose of expenditure (See instructions regarding type of information required.)

Delivery Services

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

02/12/2003

Payee name

One Source Communications, Inc.

Amount

(\$)

917.50

Payee address; City; State; Zip Code

5904 Jessamine Suite A-16

Houston TX 77081

Purpose of expenditure (See instructions regarding type of information required.)

Stationery

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
331/430**2** FILER NAME
Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date
06/06/2003**5** Payee name
One Source Communications, Inc.**6** Payee address; City; State; Zip Code
5904 Jessamine Suite A-16
Houston TX 77081**7** Amount
(\$)
106.19**8** Purpose of expenditure (See instructions regarding type of information required.)
Stationery**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
05/05/2003Payee name
Butrum & AssociatesPayee address; City; State; Zip Code
952 Echo Lane
Suite 350
Houston TX 77024Amount
(\$)
12500.00Purpose of expenditure (See instructions regarding type of information required.)
ConsultingfComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
01/29/2003Payee name
AVW-Audio VisualPayee address; City; State; Zip Code
P.O. Box 650519
Dallas TX 75265-0519Amount
(\$)
3107.86Purpose of expenditure (See instructions regarding type of information required.)
A/V eq. for announcementComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office heldDate
06/05/2003Payee name
Rives Carlberg L.P.Payee address; City; State; Zip Code
2800 Post Oak Blvd.
Suite 2400
Houston TX 77056Amount
(\$)
5968.40Purpose of expenditure (See instructions regarding type of information required.)
MediaComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
332/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

04/18/2003

5 Payee name

NGP Software, Inc.

7 Amount

(\$)

4000.00

6 Payee address; City; State; Zip Code

5505 Connecticut Avenue NW PMB 277

Washington DC 20015

8 Purpose of expenditure (See instructions regarding type of information required.)
Software**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

04/18/2003

Payee name

Sis Johnson

Amount

(\$)

913.99

Payee address; City; State; Zip Code

2800 Post Oak Blvd

Houston TX 77056-6118

Purpose of expenditure (See instructions regarding type of information required.)
Reimb for food at event**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

05/15/2003

Payee name

Mpulse

Amount

(\$)

500.00

Payee address; City; State; Zip Code

4400 Memorial Dr. Suite 3051

Houston TX 77007

Purpose of expenditure (See instructions regarding type of information required.)
Music at 5/14 event**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

02/17/2003

Payee name

ttweak

Amount

(\$)

18275.00

Payee address; City; State; Zip Code

4910 Main Street

Houston TX 77002

Purpose of expenditure (See instructions regarding type of information required.)
Media**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
333/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

03/31/2003

5 Payee name

Rives Carlberg L.P.

7 Amount

(\$)

165.74

6 Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**8 Purpose of expenditure** (See instructions regarding type of information required.)

Media

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

06/30/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

264.06

Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**Purpose of expenditure** (See instructions regarding type of information required.)

Media

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/14/2003

Payee name

Susybelle Zook

Amount

(\$)

183.98

Payee address; City; State; Zip Code

1702 Morse Street

Houston TX 77019

Purpose of expenditure (See instructions regarding type of information required.)

Reimb for computer supplies

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/14/2003

Payee name

Western Lithograph

Amount

(\$)

216.50

Payee address; City; State; Zip Code

4335 Directors Row Texas

Houston TX 77092

Purpose of expenditure (See instructions regarding type of information required.)

Invitations-printing

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
334/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

04/04/2003

5 Payee name

Rives Carlberg L.P.

7 Amount
(\$)

508.66

6 Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**8 Purpose of expenditure** (See instructions regarding type of information required.)
Direct Mail**9 Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

05/15/2003

Payee name

ttweak LLC

Amount(\$)
26885.00**Payee address; City; State; Zip Code**

4910 Main Street

Houston TX 77002

Purpose of expenditure (See instructions regarding type of information required.)
TV Production**Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

03/11/2003

Payee name

Rives Carlberg L.P.

Amount(\$)
995.00**Payee address; City; State; Zip Code**2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**Purpose of expenditure** (See instructions regarding type of information required.)
Banner**Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

02/12/2003

Payee name

Hotshot

Amount(\$)
49.80**Payee address; City; State; Zip Code**

P.O. Box 701189

Houston TX 77270-1189

Purpose of expenditure (See instructions regarding type of information required.)
Delivery Services**Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
335/430**2** FILER NAME

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

06/30/2003

5 Payee name

KLM Consulting

7 Amount
(\$)

3000.00

6 Payee address; City; State; Zip Code

950 Althea Drive

Houston TX 77018

8 Purpose of expenditure (See instructions regarding type of information required.)

Consulting

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/13/2003

Payee name

Darcy Mackey

Amount

(\$)

4500.00

Payee address; City; State; Zip Code

3303 S. Rice

Suite 210-B

Houston TX 77056

Purpose of expenditure (See instructions regarding type of information required.)

Contract Labor

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

02/21/2003

Payee name

U. S. Postmaster

Amount

(\$)

370.00

Payee address; City; State; Zip Code

Barbara Jordan Main Post Office

Houston TX 77201-9998

Purpose of expenditure (See instructions regarding type of information required.)

Postage

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/14/2003

Payee name

Andrea White

Amount

(\$)

111.00

Payee address; City; State; Zip Code

101 Stablewood Court

Houston TX 77024

Purpose of expenditure (See instructions regarding type of information required.)

Reimb for postage

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
336/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

03/05/2003

5 Payee name

Datavox

7 Amount
(\$)

292.30

6 Payee address; City; State; Zip Code

PO Box 297468

Houston TX 77297-7468

8 Purpose of expenditure (See instructions regarding type of information required.)
Phones**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

05/15/2003

Payee name

Richard Lapin

Amount
(\$)
8.04

Payee address; City; State; Zip Code

2000 Bagby #5401

Houston TX 77002

Purpose of expenditure (See instructions regarding type of information required.)
Food for fundraising eventComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

06/06/2003

Payee name

Datavox

Amount
(\$)
741.30

Payee address; City; State; Zip Code

PO Box 297468

Houston TX 77297-7468

Purpose of expenditure (See instructions regarding type of information required.)
PhonesComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

06/29/2003

Payee name

Andrew Tran

Amount
(\$)
242.19

Payee address; City; State; Zip Code

P.O. Box 441417

Houston TX 77244-1417

Purpose of expenditure (See instructions regarding type of information required.)
SignsComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
337/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

06/30/2003

5 Payee name

Rives Carlberg L.P.

7 Amount
(\$)

4106.10

6 Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**8** Purpose of expenditure (See instructions regarding type of information required.)
Printing**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

05/30/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

61.70

Payee address; City; State; Zip Code

2800 Post Oak Blvd.
Suite 2400
Houston TX 77056Purpose of expenditure (See instructions regarding type of information required.)
MediaComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

05/29/2003

Payee name

Nicholas Almanza

Amount

(\$)

66.24

Payee address; City; State; Zip Code

720 N. Post Oak Road
4th Floor
Houston TX 77024Purpose of expenditure (See instructions regarding type of information required.)
Reimb for office suppliesComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

04/11/2003

Payee name

Butrum & Associates

Amount

(\$)

62.31

Payee address; City; State; Zip Code

952 Echo Lane
Suite 350
Houston TX 77024Purpose of expenditure (See instructions regarding type of information required.)
Paper for invitationsComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
338/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

05/15/2003

5 Payee name

Keir Murray

7 Amount

(\$)

850.00

6 Payee address; City; State; Zip Code

950 Althea Drive

Houston TX 77018

8 Purpose of expenditure (See instructions regarding type of information required.)

Consulting

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

06/19/2003

Payee name

Premiumco.com

Amount

(\$)

227.22

Payee address; City; State; Zip Code

9135 Katy Fwy Suite 88

Houston TX 77024

Purpose of expenditure (See instructions regarding type of information required.)

Computer equipment

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/15/2003

Payee name

Alliance Payroll Service

Amount

(\$)

43.30

Payee address; City; State; Zip Code

12707 North Freeway

Suite 320

Houston TX 77060

Purpose of expenditure (See instructions regarding type of information required.)

Payroll services

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/23/2003

Payee name

Andrea Young

Amount

(\$)

100.00

Payee address; City; State; Zip Code

5500 Sampson St #2309

Houston TX 77004

Purpose of expenditure (See instructions regarding type of information required.)

Reimbursement: City maps

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
339/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

05/15/2003

5 Payee name

Triet Nguyen

7 Amount

(\$)

194.82

6 Payee address; City; State; Zip Code1415 Louisiana
Suite 3000
Houston TX 77002**8 Purpose of expenditure** (See instructions regarding type of information required.)

Reimb for computer equipment

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

06/30/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

271.34

Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**Purpose of expenditure** (See instructions regarding type of information required.)

Direct Mail

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

05/30/2003

Payee name

Darcy Mackey

Amount

(\$)

2250.00

Payee address; City; State; Zip Code3303 S. Rice
Suite 210-B
Houston TX 77056**Purpose of expenditure** (See instructions regarding type of information required.)

Contract Labor

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

05/15/2003

Payee name

Deborah Whitehead

Amount

(\$)

589.92

Payee address; City; State; Zip Code1415 Louisiana Street, Suite 3000
Houston TX 77002**Purpose of expenditure** (See instructions regarding type of information required.)

Reimb 5 de mayo parade

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
340/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

05/22/2003

5 Payee name

Michael Moore

7 Amount
(\$)

99.95

6 Payee address; City; State; Zip Code

2110 Baldwin

Houston TX 77033

8 Purpose of expenditure (See instructions regarding type of information required.)
Reimb for computer expense**9 Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

03/17/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

183.52

Payee address; City; State; Zip Code

2800 Post Oak Blvd.

Suite 2400

Houston TX 77056

Purpose of expenditure (See instructions regarding type of information required.)
Media**Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

06/06/2003

Payee name

Andrew Tran

Amount

(\$)

472.42

Payee address; City; State; Zip Code

P.O. Box 441417

Houston TX 77244-1417

Purpose of expenditure (See instructions regarding type of information required.)
Signs**Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

05/23/2003

Payee name

All Points Moving and Storage

Amount

(\$)

379.50

Payee address; City; State; Zip Code

7225 W. Sam Parkway N.

Houston TX 77040-3190

Purpose of expenditure (See instructions regarding type of information required.)
Moving expenses**Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
341/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

03/05/2003

5 Payee name

U. S. Postmaster

7 Amount

(\$)

700.00

6 Payee address; City; State; Zip Code

Barbara Jordan Main Post Office

Houston TX 77201-9998

8 Purpose of expenditure (See instructions regarding type of information required.)
Postage**9** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/22/2003

Payee name

Michael Moore

Amount

(\$)

102.18

Payee address; City; State; Zip Code

2110 Baldwin

Houston TX 77033

Purpose of expenditure (See instructions regarding type of information required.)
Pagers/Cell Phone reimb

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/11/2003

Payee name

Butrum & Associates

Amount

(\$)

58.34

Payee address; City; State; Zip Code

952 Echo Lane
Suite 350

Houston TX 77024

Purpose of expenditure (See instructions regarding type of information required.)
#9 Envelopes

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

06/21/2003

Payee name

Pam Rosenauer

Amount

(\$)

11.98

Payee address; City; State; Zip Code

5711 Sugar Hill #68

Houston TX 77057

Purpose of expenditure (See instructions regarding type of information required.)
Reimb for supplies

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
342/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)

C00000000

4 Date

05/30/2003

5 Payee name

Rives Carlberg L.P.

7 Amount(\$)
24043.90**6 Payee address; City; State; Zip Code**2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**8 Purpose of expenditure** (See instructions regarding type of information required.)

Direct Mail

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

03/27/2003

Payee name

Matrix Consulting

Amount(\$)
5692.00**Payee address; City; State; Zip Code**15255 Shapiro Springs Lane

Houston TX 77095**Purpose of expenditure** (See instructions regarding type of information required.)

Computers

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

06/06/2003

Payee name

Richard Lapin

Amount(\$)
6.00**Payee address; City; State; Zip Code**2000 Bagby #5401

Houston TX 77002**Purpose of expenditure** (See instructions regarding type of information required.)

Reimb parking

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

02/27/2003

Payee name

Alliance Payroll Service

Amount(\$)
39.24**Payee address; City; State; Zip Code**12707 North Freeway
Suite 320
Houston TX 77060**Purpose of expenditure** (See instructions regarding type of information required.)

Payroll service

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
343/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

01/31/2003

5 Payee name

Andrea Young

7 Amount(\$)
1327.23**6 Payee address; City; State; Zip Code**

5500 Sampson St #2309

Houston TX 77004

8 Purpose of expenditure (See instructions regarding type of information required.)
Net Payroll**9 Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

02/27/2003

Payee name

Jackson and Company

Amount(\$)
2420.52**Payee address; City; State; Zip Code**

PO Box 130260

Houston TX 77219-0260

Purpose of expenditure (See instructions regarding type of information required.)
Food and service**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

03/21/2003

Payee name

U. S. Postmaster

Amount(\$)
740.00**Payee address; City; State; Zip Code**

Barbara Jordan Main Post Office

Houston TX 77201-9998

Purpose of expenditure (See instructions regarding type of information required.)
Postage**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held**Date**

06/21/2003

Payee name

Andrea Young

Amount(\$)
92.02**Payee address; City; State; Zip Code**

5500 Sampson St #2309

Houston TX 77004

Purpose of expenditure (See instructions regarding type of information required.)
Reimb for Parade Supplies**Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
344/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

05/23/2003

5 Payee name

Christina Cabral

7 Amount

(\$)

179.42

6 Payee address; City; State; Zip Code

2250 Bering Drive #34

Houston TX 77057

8 Purpose of expenditure (See instructions regarding type of information required.)

Reimb for 5 de mayo parade

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/05/2003

Payee name

Datavox

Amount

(\$)

487.14

Payee address; City; State; Zip Code

PO Box 297468

Houston TX 77297-7468

Purpose of expenditure (See instructions regarding type of information required.)

Phones

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/14/2003

Payee name

Andrea Young

Amount

(\$)

1277.23

Payee address; City; State; Zip Code

5500 Sampson St #2309

Houston TX 77004

Purpose of expenditure (See instructions regarding type of information required.)

Net Payroll

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/25/2003

Payee name

SBC

Amount

(\$)

88.58

Payee address; City; State; Zip Code

P.O. Box 3025

Houston TX 77097-0043

Purpose of expenditure (See instructions regarding type of information required.)

Phones

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
345/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

05/16/2003

5 Payee name

Rives Carlberg L.P.

7

Amount

(\$)

12000.00

6 Payee address; City; State; Zip Code2800 Post Oak Blvd.
Suite 2400
Houston TX 77056**8** Purpose of expenditure (See instructions regarding type of information required.)
Media**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

04/11/2003

Payee name

Butrum & Associates

Amount

(\$)

519.30

Payee address; City; State; Zip Code

952 Echo Lane
Suite 350
Houston TX 77024Purpose of expenditure (See instructions regarding type of information required.)
Mail ServiceComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

04/30/2003

Payee name

Alliance Payroll Service

Amount

(\$)

3337.95

Payee address; City; State; Zip Code

12707 North Freeway
Suite 320
Houston TX 77060Purpose of expenditure (See instructions regarding type of information required.)
FICA/Payroll TaxesComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

06/30/2003

Payee name

Datavox

Amount

(\$)

1607.73

Payee address; City; State; Zip Code

PO Box 297468

Houston TX 77297-7468

Purpose of expenditure (See instructions regarding type of information required.)
PhonesComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F****The INSTRUCTION GUIDE explains how to complete this form.****1** Total pages report:
346/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

04/01/2003

5 Payee name

All Points Moving and Storage

7

Amount

(\$)

898.00

6 Payee address; City; State; Zip Code

7225 W. Sam Parkway N.

Houston TX 77040-3190

8 Purpose of expenditure (See instructions regarding type of information required.)

Moving expenses

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/23/2003

Payee name

Andrea Young

Amount

(\$)

25.00

Payee address; City; State; Zip Code

5500 Sampson St #2309

Houston TX 77004

Purpose of expenditure (See instructions regarding type of information required.)

Reimbursement: Campaign expenses

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/14/2003

Payee name

Susybelle Zook

Amount

(\$)

14.18

Payee address; City; State; Zip Code

1702 Morse Street

Houston TX 77019

Purpose of expenditure (See instructions regarding type of information required.)

Reimb for computer supplies

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/30/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

200.70

Payee address; City; State; Zip Code

2800 Post Oak Blvd.

Suite 2400

Houston TX 77056

Purpose of expenditure (See instructions regarding type of information required.)

Photography

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
347/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4 Date**

06/27/2003

5 Payee name

Andrew Tran

7

Amount

(\$)

208.25

6 Payee address;

City; State; Zip Code

P.O. Box 441417

Houston TX 77244-1417

8 Purpose of expenditure (See instructions regarding type of information required.)

Signs

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

06/30/2003

Payee name

Rives Carlberg L.P.

Amount

(\$)

223.80

Payee address;

City; State; Zip Code

2800 Post Oak Blvd.

Suite 2400

Houston TX 77056

Purpose of expenditure (See instructions regarding type of information required.)

Media

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

03/18/2003

Payee name

Darcy Mackey

Amount

(\$)

2250.00

Payee address;

City; State; Zip Code

3303 S. Rice

Suite 210-B

Houston TX 77056

Purpose of expenditure (See instructions regarding type of information required.)

Contract Labor

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/15/2003

Payee name

Richard Lapin

Amount

(\$)

16.23

Payee address;

City; State; Zip Code

2000 Bagby #5401

Houston TX 77002

Purpose of expenditure (See instructions regarding type of information required.)

Supplies reimb

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
348/430**2** FILER NAME

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

03/31/2003

5 Payee name

Alliance Payroll Service

7 Amount(\$)
1657.02**6** Payee address; City; State; Zip Code12707 North Freeway
Suite 320
Houston TX 77060**8** Purpose of expenditure (See instructions regarding type of information required.)
FICA/Payroll Taxes**9** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

04/11/2003

Payee name

Butrum & Associates

Amount

(\$)
12500.00

Payee address; City; State; Zip Code

952 Echo Lane
Suite 350
Houston TX 77024Purpose of expenditure (See instructions regarding type of information required.)
ConsultingComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

05/22/2003

Payee name

Michael Moore

Amount

(\$)
152.11

Payee address; City; State; Zip Code

2110 Baldwin
Houston TX 77033Purpose of expenditure (See instructions regarding type of information required.)
Reimb for supplies for tv shootComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

05/05/2003

Payee name

One Source Communications, Inc.

Amount

(\$)
268.56

Payee address; City; State; Zip Code

5904 Jessamine Suite A-16
Houston TX 77081Purpose of expenditure (See instructions regarding type of information required.)
StationeryComplete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:
349/430**2 FILER NAME**

Mr. William

H. White

3 ACCOUNT # (Ethics Commission filers)
C00000000**4** Date

01/14/2003

5 Payee name

Elections Administration

7

Amount

(\$)

60.00

6 Payee address; City; State; Zip Code

301 Jackson

Richmond TX 77469

8 Purpose of expenditure (See instructions regarding type of information required.)

Voter File

9 Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

06/27/2003

Payee name

Andrew Tran

Amount

(\$)

259.90

Payee address; City; State; Zip Code

P.O. Box 441417

Houston TX 77244-1417

Purpose of expenditure (See instructions regarding type of information required.)

Signs

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

04/30/2003

Payee name

RM Crowe

Amount

(\$)

6000.00

Payee address; City; State; Zip Code

5100 Westheimer

Suite 231

Houston TX 77027

Purpose of expenditure (See instructions regarding type of information required.)

Rent

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

05/27/2003

Payee name

Western Lithograph

Amount

(\$)

2168.25

Payee address; City; State; Zip Code

4335 Directors Row Texas

Houston TX 77092

Purpose of expenditure (See instructions regarding type of information required.)

Stationery printing

Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held